NEW HAMPSHIRE STATEMENT OF FINANCIAL INTERESTS - RSA 15-A

Type or Print Clearly						X. 41	031121	
Full Name <u>PETER</u>	W. HEED					one, N.H.		
Primary Occupation	Junzy	e-mail *	optional phec	d 6 co.cher	hire. nh. us	Work Phone 603	3-352-0056	<u></u>
Name of office, appointment, o employment with government		Cheshive	County A	Harry				
A. List below the name, addre proprietor, or employee, or se calendar year. Sources of retire Nuk (rved in any other profe	essional or advisory	capacity, and from	which any inc	come in excess of			
2.					APR 0	1 2009		
3.					NEW HA	MPSHIRE Y OF STATE		
If you have no qualifying incom	e indicate by writing yo	ur initials next to the	e following stateme	nt.	My income does r			
B. Indicate below whether you reportable special interest in an discipline a licensee or permitte financial effect on you or a fami	item on this list if a cha ee, or other decision by	nge in law, a change government affectin	in administrative rig g the listed busines	ule, a decision w	vhether or not to a	ward a contract, gra	ant a license or perr	nit,
1. Any profession, occu	•	nsed or certified by the	he State of New Har	· /	•	, occupation, or cat	egory of business	
2. Health Care 3. I	nsurance u	Real Estate, including	- 11	5. Banking o services	or financial	6. State of Ne municipal emp	w Hampshire, coun	Ty. or A
7. N.H. Retirement System	8. Current use assessment prog	11	9. Restaurants/ odging	11	Sale and distribution		11. Practic	e of
12. Any business regulate Utilities Commission	d by the Public	13. Horse or do	og racing, or other l	egal forms	14. Education	15. Water Ro		Count
16. Agriculture	17. N.H. Busin	ness Busine ts Tax Enterpr	1	rest and lends Tax	18. Optional: Sp special inte	pecify any other are erest —-	a in which you have	: a
I have read RSA 15-A and herebers RSA 15-A:9 Penalty. Any person provisions of this chapter or knof a misdemeanor.	on who knowingly fails t	to comply with the	\sim	A	est of my knowledge	Ed .	3/30/0	9